YSTEM:OS - DIALOG OneSearch
File 155:MEDLINE(R) 1951-2006/May 03
(c) format only 2006 Dialog
File 73:EMBASE 1974-2006/May 02
(c) 2006 Elsevier Science B.V.
File 5:Biosis Previews(R) 1969-2006/Apr W4
(c) 2006 BIOSIS
File 654:US Pat.Full. 1976-2006/Apr 27
(c) format only 2006 Dialog
*File 654: IPCR/8 classification codes now searchable in 2006 records.
For information about IC= index changes, see HELP NEWSIPCR.
File 349:PCT FULLTEXT 1979-2006/UB=20060427,UT=20060420
(c) 2006 WIPO/Univentio
*File 349: For important information about IPCR/8 and forthcoming
changes to the IC= index, see HELP NEWSIPCR.
File 10:AGRICOLA 70-2006/Mar
(c) format only 2006 Dialog
File 324:German Patents Fulltext 1967-200616
(c) 2006 Univentio
*File 324: For important information about IPCR/8 and forthcoming
changes to the IC= index, see HELP NEWS IPCR.
File 203:AGRIS 1974-2006/Nov
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File 357:Derwent Biotech Res. 1982-2006/Apr W5
(c) 2006 Thomson Derwent & ISI
File 340:CLAIMS(R)/US Patent 1950-06/Apr 27
(c) 2006 IFI/CLAIMS(R)
*File 340: IPCR/8 classification codes now searchable in 2006 records.
For important information about IC=index changes, see HELP NEWSIPCR.
File 94:JICST-EPlus 1985-2006/Feb W1
(c)2006 Japan Science and Tech Corp(JST)
File 35:Dissertation Abs Online 1861-2006/Apr
(c) 2006 ProQuest Info&Learning
File 348:EUROPEAN PATENTS 1978-2006/ 200617
(c) 2006 European Patent Office
*File 348: For important information about IPCR/8 and forthcoming
changes to the IC= index, see HELP NEWSIPCR.
File 144:Pascal 1973-2006/Apr W2
(c) 2006 INIST/CNRS

Set	Items	Description

Cost is in DialUnits
? s
Terminal set to DLINK
? t s5/9/1-5 8 9 11 147 155
>>>Null command ignored
? t s5/9/1-5 8 9 11 147 155

Updated DIALOG DIAL Index Search 4/21/06

5/9/1 (Item 1 from file: 155)
DIALOG(R)File 155:MEDLINE(R)

15173388 PMID: 15545098
Botulinum toxin type A gives adjunctive benefit to periorbital laser resurfacing.
Yamauchi Paul S; Lask GaryP; Lowe Nicholas J
UCLA School of Medicine, Los Angeles, CA, USA.
Journal of cosmetic and laser therapy - official publication of the European Society for Laser Dermatology (England) Nov 2004, 6 (3) p145-8, ISSN 1476-4172--Print Journal Code: 101136419
Publishing Model Print
Document type: Clinical Trial; Journal Article; Randomized Controlled Trial
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS; Toxbib
OBJECTIVE: Periorbital aging and lines are a result of intrinsic **skin** aging, ultraviolet damage, and repetitive action of periorbital muscles. Rejuvenation of this area should therefore be optimized by combining treatments that approach the different causative factors. METHODS: This was a single-center, prospective, randomized, placebo-controlled study comparing the efficacy and safety of combining **Botox** injections (18 units per area) with ablative laser resurfacing versus laser resurfacing alone without **Botox** in the treatment of periorbital rhytids. RESULTS: We have concluded a bilateral study comparing the effects of **Botox** versus saline placebo injections to the periorbital areas before and following erbium: YAG laser resurfacing of the areas in 33 patients. The results demonstrated that the **Botox** -treated side with laser resurfacing improved significantly more than the contralateral area treated with saline and laser in diminishing periorbital rhytids as well as textural, **pigmentation** , and other features of periorbital **skin** aging. CONCLUSION: This study illustrates the benefits of a combined approach to treating periorbital **skin** aging.
Tags: Female
Descriptors: *Botulinum Toxin Type A--administration and dosage--AD; *Cosmetic Techniques; *Laser Surgery; *Rhytidoplasty; * **Skin** Aging; Facial Muscles--physiology--PH; Humans; Injections; Muscle Contraction
CAS Registry No.: 0 (Botulinum Toxin Type A)
Record Date Created: 20041116
Record Date Completed: 20050407

5/9/2 (Item 2 from file: 155)
DIALOG(R)File 155:MEDLINE(R)

14780250 PMID: 15008861
The effect of full-face broadband light treatments alone and in combination with bilateral crow's feet Botulinum toxin type A chemodenervation.
Carruthers Jean; Carruthers Alastair

Opthalmology, University of British Columbia, Vancouver, BC, Canada. drjean@carruthers.net
Dermatologic surgery - official publication for American Society for Dermatologic Surgery et al. (United States) Mar 2004, 30 (3) p355-66; discussion 366, ISSN 1076-0512--Print Journal Code: 9504371

--ethnology--EH; Injections; Maryland--epidemiology--EP; Middle Aged; Neuromuscular Agents--therapeutic use--TU; Prevalence; **Skin** --pathology --PA
CAS Registry No.: 0 (Botulinum Toxin Type A); 0 (Neuromuscular Agents)
Record Date Created: 19990423
Record Date Completed: 19990423

5/9/5 (Item 5 from file: 155)
DIALOG(R)File 155:MEDLINE(R)

10354492 PMID: 7793763
[A case of unilateral elastosis with cysts and comedones. Favre-Racouchot syndrome]
Un cas unilateral d'elastose avec kystes et comedons de Favre et Racouchot.
Moulin G; Thomas L; Vigneau M; Fiere A
Service de Dermatologie, Hopital de l'Antiquaille, Lyon.
Annales de dermatologie et de venereologie (FRANCE) 1994, 121 (10) p721-3, ISSN 0151-9638--Print Journal Code: 7702013
Publishing Model Print
Document type: Case Reports; Journal Article ; English Abstract
Languages: FRENCH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS; NURSING
INTRODUCTION. Cutaneous elastosis with cysts and comedones (Favre-Racouchot) is one of the oldest known manifestations of helioderma. Both sides of the face are usually involved symmetrically. CASE REPORT. We observed a 65-year-old woman with extremely severe Favre-Racouchot disease localized exclusively on the left side of the face. The diagnosis of elastosis with cysts and comedones was confirmed histologically. This elastosis with cysts and comedones was associated with spasms of the hemiface treated with injections of **botulinic** toxin. This association was fortuitous and we retained actinic irradiation as the causal agent in this woman who had worked for 15 years in the same room. The elastosis occurred on the side of the face which had been continuously exposed at the same orientation to the window. COMMENTS. This original observation is similar to cases where facial exposure to artificial light or sunlight is asymmetrical, leading to a higher incidence of lesions on one side of the face: colloid milium, actinic keratosis, Dubreuilh **melanoma** (malignant lentigo) or simple helioderma. The asymmetrical nature of the actinic lesions is often related to automobile driving. This case was particular since it demonstrated that Favre-Racouchot elastosis with cysts and comedones is due to actinic irradiation and not to **skin** aging.
Tags: Female
Descriptors: *Facial Dermatoses--diagnosis--DI; *Sunlight --adverse effects--AE; Acne Vulgaris--complications--CO; Aged; Elastic Tissue --pathology--PA; English Abstract; **Epidermal** Cyst--diagnosis--DI; Facial Dermatoses--etiology--ET; Facial Muscles; Humans; Spasm--etiology--ET
Record Date Created: 19950725
Record Date Completed: 19950725

5/9/8 (Item 3 from file: 73)
DIALOG(R)File 73:EMBASE

12014416 EMBASE No: 2003125330

Introduction to Cosmetic Dermatology

Bennett M.L.; Henderson Jr. R.L.; Jorizzo J.L.
Dr. M.L. Bennett, Wake Forest University, Department of Dermatology, Winston-Salem, NC United States

Current Problems in Dermatology (CURR. PROBL. DERMATOL.) (United States) 2003, 15/2 (35-83)
CODEN: APDEB ISSN: 1040-0486
DOCUMENT TYPE: Journal ; Review
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH
NUMBER OF REFERENCES: 261

Cosmetic procedures are becoming increasingly popular with dermatologists. They are used to reverse the effects of aging, to improve the quality of the **skin** , to augment facial structures, and to improve the patient's appearance in general. They can also be beneficial for certain dermatoses. We present an introduction to cosmetic dermatologic procedures, focusing on chemical peels, botulinum toxin injections, and the use of filler substances. Following this review, the reader should have the basic knowledge to consider training to perform such procedures safety and effectively, even if he or she has not done so previously. Several agents are available for chemical peeling, each with unique properties for different therapeutic effects. Superficial peels penetrate the **epidermis** only and include alpha-hydroxy acids, salicylic acid, low-strength trichloracetic acid (TCA), and Jessner's solution. These **epidermal** peels are used to treat mild photoaging and other **epidermal** dermatoses such as acne vulgaris and are generally performed with the use of a series of peels. Medium-depth peels, such as medium-strength TCA or combination peels that use a superficial and medium-depth agent, extend into the papillary dermis or upper reticular dermis. They can eradicate fine lines and wrinkles, improve color variation, eliminate some actinic keratoses, and correct textural irregularities. Higher-strength TCA and phenol induce deep wounding into the mid-to-deep reticular dermis. These deep peels can be used to help eradicate heavy wrinkles and lines due to chronic photodamage, but their use has largely been replaced by erbium and COSUB2 laser resurfacing. Histologic studies have shown that peeling agents help alter the structure and content of the **skin** , increase production of collagen and glycosaminoglycans, eliminate solar elastosis, and normalize **epidermal** atypia. Complications are largely related to infection, **pigmentary** alteration, delayed healing, and scarring, but appropriate patient screening and prophylaxis can minimize their incidence. **Botulinum** toxin injections are used in dermatology for two main purposes: elimination or attenuation of dynamic lines and wrinkles on the face and neck and elimination or attenuation of sweating in the case of hyperhidrosis of the hands, axillae, and/or feet. With an excellent safety profile and proven efficacy, these are popular procedures for patients. The medication is a **neurotoxin** that works by temporarily inhibiting the release of acetylcholine. The administering physician must be familiar with pertinent anatomy with respect to muscles of facial expression, appropriate doses, and injection sites, all of which are covered herein. In addition to being an effective treatment by itself, botulinum toxin injections can be combined with other procedures such as laser resurfacing, filler substance injections, facelifts, blepharoplasty, etc, to prolong and improve the results. Filler substances are injected in or below the **skin** in order to replace lost volume or to increase existing volume. They are frequently used for the nasolabial folds, lips, and perioral area, but they can also be used more extensively, as is the case in pan-facial structural lipoaugmentation. Fillers are occasionally used in nonfacial areas as well, such as in aging dorsal hands or other areas of atrophy. A number of filler substances are available. The main classes of fillers are bovine collagen, human collagen, polysaccharide fillers, fat, synthetic fillers, and

combination filler substances. Most filler substances are temporary in their effect, but some do persist in the **skin** forever. The treating physician must be familiar with proper selection, handling, location and depth of placement, longevity, costs, benefits, and risks of each substance that he or she uses. The necessary information is covered in this text. This text is intended to be a complete introduction to the above-mentioned cosmetic dermatology procedures. It includes aspects such as history and mechanism of action, but it really focuses on the clinical information necessary to be able to consider performing these procedures. It includes suppliers of products, precise descriptions of how to carry out the procedures, and clinical pearls to help achieve successful outcomes.

BRAND NAME/MANUFACTURER NAME: blue peel/obagi medical products/United States; silvadene/Hoechst Marion Roussel/France; mederma/Merz/United States ; vigilon/Bard/United States; duoderm/Convatec/United States; elamax/ ferndall/United States; hibiclens/Zeneca/United States; aquaphor/beiersdorf jobst/United States; vaseline/Chesebrough/United States; myobloc/Elan/ United States; dysport/Speywood/United States; iopadine/Alcon/United States ; naphcon a/Alcon/United States; vasocon a/Ciba Vision/United States; opcon a/Bausch and Lomb/United States; aspirin; botox
MANUFACTURER NAMES: obagi medical products/United States; Hoechst Marion Roussel/France; Merz/United States; Bard/United States; Convatec/United States; ferndall/United States; Astra Zeneca/United States; Zeneca/United States; beiersdorf jobst/United States; Chesebrough/United States; Elan/ United States; Speywood/United States; Alcon/United States; Ciba Vision/ United States; Bausch and Lomb/United States
DEVICE BRAND NAME/MANUFACTURER NAME: AlloDerm/Lifecell/United States; Artecoll/Rofil/Netherlands; Cymetra/obagi/United States; Dermalogen/ Collagenesis/United States; Fascian/fascia biosystems/United States; Gore-Tex/Gore/United States; Hylan B/Biomatrix/United States; Restylane/Q Med/Sweden; SoftForm/Kinamed/United States; Zyderm I/McGhan/United States; Zyderm II/McGhan/United States; Zyplast/McGhan/United States; Hylaform/ Biomatrix/United States
DEVICE MANUFACTURER NAMES: Lifecell/United States; Rofil/Netherlands; obagi /United States; Collagenesis/United States; fascia biosystems/United States ; Gore/United States; Biomatrix/United States; Q Med/Sweden; Kinamed/United States; McGhan/United States
DRUG DESCRIPTORS:
*dermatological agent--adverse drug reaction--ae; *dermatological agent --drug combination--cb; *dermatological agent--drug therapy--dt; *

dermatological agent--pharmacology--pd; *botulinum toxin--adverse drug reaction--ae; *botulinum toxin--drug therapy--dt; *botulinum toxin --pharmacology--pd; *botulinum toxin--intramuscular drug administration--im ; *filler
2 hydroxyacid--adverse drug reaction--ae; 2 hydroxyacid--drug therapy--dt; 2 hydroxyacid--pharmacology--pd; salicylic acid--adverse drug reaction--ae; salicylic acid--drug therapy--dt; salicylic acid--pharmacology--pd; trichloroacetic acid--adverse drug reaction--ae; trichloroacetic acid--drug combination--cb; trichloroacetic acid--drug therapy--dt; trichloroacetic acid--pharmacology--pd; phenol--adverse drug reaction--ae; phenol--drug therapy--dt; phenol--pharmacology--pd; collagen--endogenous compound--ec; glycosaminoglycan--endogenous compound--ec; erbium; carbon dioxide; acetylcholine--endogenous compound--ec; antivirus agent--drug therapy--dt; antivirus agent--oral drug administration--po; sulfadiazine silver--drug therapy--dt; glycolic acid--drug combination--cb; glycolic acid--drug therapy--dt; glycolic acid--pharmacology--pd; corticosteroid--drug therapy --dt; corticosteroid--intralesional drug administration--il; corticosteroid --topical drug administration--tp; acetylsalicylic acid--drug therapy--dt; macrogol--drug therapy--dt; duoderm--drug therapy--dt; silicone gel--drug therapy--dt; fluorouracil--drug combination--cb; fluorouracil--drug therapy

--dt; fluorouracil--pharmacology--pd; sunscreen; retinoid; hydroquinone; aciclovir; famciclovir; valaciclovir; unindexed drug; unclassified drug; chlorhexidine gluconate; xipamide; petrolatum; botulinum toxin B; botulinum toxin A; naphazoline
MEDICAL DESCRIPTORS:
*cosmetic industry
aging; **skin** abrasion; dermoepidermal junction; **skin** disease--drug therapy--dt; **skin** color; actinic keratosis--drug therapy--dt; histology; **skin** structure; elastosis--drug therapy--dt; tissue repair; scar formation --drug therapy--dt; scar formation--side effect--si; side effect--side effect--si; **skin** infection--side effect--si; **skin** pigmentation; hyperhidrosis--drug therapy--dt; drug safety; drug efficacy; facial expression; injection site; eyelid reconstruction; risk benefit analysis; cost; treatment outcome; drug mechanism; drug contraindication; telangiectasia--side effect--si; erythema--side effect--si; contact dermatitis--side effect--si; drug toxicity--side effect--si; flushing; herpes simplex--drug therapy--dt; herpes simplex--side effect--si; pruritus --side effect--si; hyperpigmentation--side effect--si; ectropion--side effect--si; chloasma--drug therapy--dt; lentigo--drug therapy--dt; ecchymosis--side effect--si; edema--side effect--si; headache--side effect --si; rash--side effect--si; ptosis--drug therapy--dt; ptosis--side effect --si; diplopia--side effect--si; retrobulbar hemorrhage--side effect--si; entropion--side effect--si; keratitis--side effect--si; dose response; rhytidoplasty; human; nonhuman; review
DRUG TERMS (UNCONTROLLED): chemical peeling agent--adverse drug reaction --ae; chemical peeling agent--drug combination--cb; chemical peeling agent --drug therapy--dt; chemical peeling agent--pharmacology--pd; Jessner solution--adverse drug reaction--ae; Jessner solution--drug combination--cb ; Jessner solution--drug therapy--dt; Jessner solution--pharmacology--pd; blue peel; mederma; elamax; iopadine; vasocon a; opcon a
CAS REGISTRY NO.: 63-36-5, 69-72-7 (salicylic acid); 14357-05-2, 76-03-9 (trichloroacetic acid); 108-95-2, 3229-70-7 (phenol); 9007-34-5 (collagen); 7440-52-0 (erbium); 124-38-9, 58561-67-4 (carbon dioxide); 51-84-3, 60-31-1, 66-23-9 (acetylcholine); 22199-08-2 (sulfadiazine silver); 79-14-1 (glycolic acid); 493-53-8, 50-78-2, 53663-74-4, 53664-49-6, 63781-77-1 (acetylsalicylic acid); 25322-68-3 (macrogol); 51-21-8 (fluorouracil); 123-31-9 (hydroquinone); 59277-89-3 (aciclovir) ; 104227-87-4 (famciclovir); 124832-26-4 (valaciclovir); 18472-51-0 (chlorhexidine gluconate); 14293-44-8 (xipamide); 8009-03-8 (petrolatum) ; 93384-43-1 (botulinum toxin A); 5144-52-5, 550-99-2, 835-31-4 (naphazoline); 60747-34-4 (vasocon a)
SECTION HEADINGS:
  013 Dermatology and Venereology
  027 Biophysics, Bioengineering and Medical Instrumentation
  036 Health Policy, Economics and Management
  037 Drug Literature Index
  038 Adverse Reaction Titles

5/9/9 (Item 4 from file: 73)
DIALOG(R)File 73:EMBASE

06991814 EMBASE No: 1997277960
The role of the agouti gene in the yellow obese syndrome
Miltenberger R.J.; Mynatt R.L.; Wilkinson J.E.; Woychik R.P.
R.P. Woychik, Department of Pediatrics, Case Western Reserve University, 11100 Euclid Avenue, Cleveland, OH 44106 United States
Journal of Nutrition (J. NUTR.) (United States) 1997, 127/9 (1902S-1907S)
CODEN: JONUA ISSN: 0022-3166

DOCUMENT TYPE: Journal; Conference Paper
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH
NUMBER OF REFERENCES: 81

The yellow obese syndrome in mice encompasses many pleiotropic effects including yellow fur, maturity-onset obesity, hyperinsulinemia, insulin resistance, hyperglycemia, increased skeletal length and lean body mass, and increased susceptibility to neoplasia. The molecular basis of this syndrome is beginning to be unraveled and may have implications for human obesity and diabetes. Normally, the agouti gene is expressed during the **hair** -growth cycle in the neonatal **skin** where it functions as a paracrine regulator of pigmentation. The secreted agouti protein antagonizes the binding of the alpha- melanocyte-stimulating hormone to its receptor (melanocortin 1 receptor) on the surface of **hair** bulb melanocytes, causing alterations in intracellular cAMP levels. Widespread, ectopic expression of the mouse agouti gene is central to the yellow obese phenotype, as demonstrated by the molecular cloning of several dominant agouti mutations and the ubiquitous expression of the wild-type agouti gene in transgenic mice. Recent experiments have revealed that the hypothalamus and adipose tissue are biologically active target sites for agouti in the yellow obese mutant lines.

DRUG DESCRIPTORS:
*protein--endogenous compound--ec; *recombinant protein
acyl coenzyme a desaturase--endogenous compound--ec; adenosine triphosphate --endogenous compound--ec; alpha intermedin--endogenous compound--ec; amino acid--endogenous compound--ec; beta actin--endogenous compound--ec; calcium channel stimulating agent; complementary dna; corticosteroid--endogenous compound--ec; cyclic amp--endogenous compound--ec; dna--endogenous compound --ec; fatty acid synthase--endogenous compound--ec; glucose--endogenous compound--ec; growth hormone--endogenous compound--ec; growth hormone releasing factor--endogenous compound--ec; guanine nucleotide binding protein--endogenous compound--ec; hormone receptor--endogenous compound--ec ; insulin--endogenous compound--ec; **melanin** --endogenous compound--ec; messenger rna--endogenous compound--ec; **neurotoxin** ; nucleotide --endogenous compound--ec; phosphoglycerate kinase--endogenous compound--ec ; potassium; triacylglycerol--endogenous compound--ec; unclassified drug
MEDICAL DESCRIPTORS:
*gene; *obesity--etiology--et; *obesity--diagnosis--di
adipose tissue; body mass; caloric intake; cancer susceptibility; conference paper; diabetes mellitus--diagnosis--di; energy expenditure; gene expression; human; hyperinsulinemia--diagnosis--di; hypothalamus; insulin resistance; melanocyte; molecular cloning; mutation; nonhuman; phenotype; syndrome; transgenic mouse
DRUG TERMS (UNCONTROLLED): agouti protein--endogenous compound--ec
CAS REGISTRY NO.: 67254-75-5 (protein); 9014-34-0 (acyl coenzyme a desaturase); 15237-44-2, 56-65-5, 987-65-5 (adenosine triphosphate); 65072-01-7 (amino acid); 60-92-4 (cyclic amp); 9007-49-2 (dna); 9045-77-6 (fatty acid synthase); 50-99-7, 84778-64-3 (glucose); 36992-73-1, 37267-05-3, 66419-50-9, 9002-72-6 (growth hormone); 83930-13-6, 9034-39-3 (growth hormone releasing factor); 9004-10-8 (insulin); 8049-97-6 (**melanin**); 39386-17-9 (**neurotoxin**); 9001-83-6 (phosphoglycerate kinase); 7440-09-7 (potassium)
SECTION HEADINGS:
003 Endocrinology
022 Human Genetics
029 Clinical and Experimental Biochemistry

5/9/11 (Item 1 from file: 5)
DIALOG(R)File 5:Biosis Previews(R)

0014446893 BIOSIS NO.: 200300405612

[24th International Congress of the Association des Dermatologistes Francophones, Sfax, Tunisia, April, 30-May, 3, 2003.]

ORIGINAL LANGUAGE TITLE: 24e Congres International de l'Association des dermatologistes Francophones, Sfax, Tunisie, 30 avril-3 mai 2003.
AUTHOR: Association des Dermatologistes Francophones
JOURNAL: Annales de Dermatologie et de Venereologie 130 (Suppl. 4): p 2S14-2S167 Avril 2003 2003
MEDIUM: print
CONFERENCE/MEETING: 24th International Congress of the Association des Dermatologistes Francophones April 30-May 03, 2003; 20030430
ISSN: 0151-9638 _(ISSN print)
DOCUMENT TYPE: Meeting; Meeting Summary
RECORD TYPE: Abstract
LANGUAGE: French

ABSTRACT: This meeting contains abstracts of 394 papers, including 338 posters, all written in French, on a wide variety of topics in dermatology in the human and in animal models, including surgical dermatology, cosmetic surgery, circumcision, telemedicine, rosacea, pyoderma, malignant **melanoma** , leg ulcer, pemphigus, **pigment** incontinence, keratinization, basal cell carcinoma, hemangioma, mycosis, hirsutism, acne, herpes, HIV, AIDS, vegetables allergy, cosmetics allergy, **skin** prick test, **skin** patch test, photoprotection, free radicals, antibiotics, antiretroviral drugs, **botulinum** toxin, argan oil, regional issues in dermatology in Northern Africa, and legal issues.

DESCRIPTORS:
MAJOR CONCEPTS: Dermatology--Human Medicine, Medical Sciences
BIOSYSTEMATIC NAMES: Animalia--Animalia; Hominidae--Primates, Mammalia, Vertebrata, Chordata, Animalia
ORGANISMS: animal (Animalia); human (Hominidae)
COMMON TAXONOMIC TERMS: Animals; Chordates; Humans; Mammals; Primates; Vertebrates
DISEASES: AIDS {acquired immunodeficiency syndrome}--immune system disease, viral disease; HIV infection {human immunodeficiency virus infection}--blood and lymphatic disease, immune system disease, viral disease; acne--integumentary system disease; basal cell carcinoma--integumentary system disease, neoplastic disease; cosmetics allergy--immune system disease; hemangioma--neoplastic disease; herpes infection--viral disease; hirsutism--endocrine disease/gonads, integumentary system disease; leg ulcer--integumentary system disease; malignant melanoma--integumentary system disease, neoplastic disease; mycosis--fungal disease; pemphigus--immune system disease, integumentary system disease; pigment incontinence--integumentary system disease; pyoderma--integumentary system disease; rosacea--integumentary system disease; vegetable allergy--immune system disease
MESH TERMS: Acquired Immunodeficiency Syndrome (MeSH); HIV Infections (MeSH); Acne Vulgaris (MeSH); Carcinoma, Basal Cell (MeSH); Hemangioma (MeSH); Herpesviridae Infections (MeSH); Hirsutism (MeSH); Leg Ulcer (MeSH); Melanoma (MeSH); Mycoses (MeSH); Pemphigus (MeSH); Pyoderma (MeSH); Acne Rosacea (MeSH)
CHEMICALS & BIOCHEMICALS: antibiotics--antibacterial-drug, antiinfective-drug; antiretroviral drugs--antiinfective-drug, antiviral-drug; botulinum toxin--toxin; free radicals
METHODS & EQUIPMENT: circumcision--clinical techniques; cosmetic surgery--clinical techniques; photoprotection--clinical techniques, therapeutic and prophylactic techniques; **skin** prick test--clinical techniques, therapeutic and prophylactic techniques

GEOGRAPHICAL NAME: Northern Africa (Africa) (Ethiopian region) (Palearctic region)
MISCELLANEOUS TERMS: argan oil; keratinization; legal issues; regional issues; surgical dermatology; telemedicine; Meeting Summary
CONCEPT CODES:
00520 General biology - Symposia, transactions and proceedings
10060 Biochemistry studies - General
10064 Biochemistry studies - Proteins, peptides and amino acids
12512 Pathology - Therapy
15006 Blood - Blood, lymphatic and reticuloendothelial pathologies
17006 Endocrine - Gonads and placenta
18506 Integumentary system - Pathology
24004 Neoplasms - Pathology, clinical aspects and systemic effects
34508 Immunology - Immunopathology, tissue immunology
36006 Medical and clinical microbiology - Virology
36008 Medical and clinical microbiology - Mycology
38502 Chemotherapy - General, methods and metabolism
38504 Chemotherapy - Antibacterial agents
38506 Chemotherapy - Antiviral agents
BIOSYSTEMATIC CODES:
33000 Animalia
86215 Hominidae

5/9/147 (Item 1 from file: 94)

05341668 JICST ACCESSION NUMBER: 02A0949775 FILE SEGMENT: JICST-E
Treatment in Dermatology for the Improvement of Patients' QOL. III. Practice in Private Clinics. 1. Treatment to Improve Patients' QOL in a Private Clinic.
UEDA SETSUKO (1)
(1) Uedasetsukokurinikku(fukuokashi)
Hifuka no Rinsho(Rinsho Derma (Tokyo), 2002, VOL.44,NO.11, PAGE.1357-1367, FIG.16, TBL.1, REF.12
JOURNAL NUMBER: Z0122BAV ISSN NO: 0018-1404
UNIVERSAL DECIMAL CLASSIFICATION: 616.5-08
LANGUAGE: Japanese COUNTRY OF PUBLICATION: Japan
DOCUMENT TYPE: Journal
ARTICLE TYPE: Commentary
MEDIA TYPE: Printed Publication
ABSTRACT: Treatment to improve patients' QOL in the beauty dermatology is described. In order to improve QOL of the healthy **skin** and maintain the youthful **skin** , the protection of ultraviolet ray is important. The patch test of cosmetics for prevention of senile change is discussed. Chemical peeling (CP), collagen injection, laser depilation and **botulinus** toxin injection are discussed. Effectiveness of laser treatment of **pigmentary** lesion and vascular lesion on the improvement in QOL of persons with dermatosis is emphasized. CP of acne and xanthoma is described. Finally, this paper indicates that fundamentals and experience of the dermatology are essential for the beauty dermatologist.
DESCRIPTORS: **skin** disease; qualty of life; cosmetic surgery; **skin** (animal tissue); ultraviolet radiation; dermatology; cosmetic; senile change; patch test; collagen; laser therapy; unhairing; botulinus toxin ; nevus; keratosis; hemangioma; rosacea; acne; xanthoma; physician; integumentary preparation; human(primates); plastic surgery(technique); aliphatic carboxylic acid; aliphatic chlorine compound
IDENTIFIERS: practitioner; chemexfoliation

BROADER DESCRIPTORS: disease; life(livelihood); operative surgery; epithelial tissue; animal tissue; biomedical tissue; organization; light; electromagnetic wave; wave motion; radioactive ray; medicine; natural science; science; perfumery and cosmetics; aging(physiology); test; scleroprotein; animal protein; protein; therapy; laser application; utilization; removal; exotoxin; bacterial toxin; microorganism toxin; poison; toxic substance; matter; benign tumor; tumor; vascular disease; cardiovascular disease; vascular tissue tumor; metabolic disease; medical worker; job classified employee; worker; drug; carboxylic acid; aliphatic halogen compound; organohalogene compound; organochlorine compound
CLASSIFICATION CODE(S): GF05010P

5/9/155 (Item 1 from file: 144)
DIALOG(R)File 144:Pascal

16579507 PASCAL No.: 04-0228406
The effect of full-face broadband light treatments alone and in combination with bilateral crow's feet botulinum toxin type A chemodenervation. Commentary
CARRUTHERS Jean; CARRUTHERS Alastair; DOVER Jeffrey S comment
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BACKGROUND. Broadband light (BBL; Intense Pulsed Light; Lumenis Ltd., Yokneam, Israel) is a powerful, nonablative, light-based technology that targets **melanin** and hemoglobin and stimulates the formation of collagen and elastin. **Botulinum** toxin type A (BTX-A; **BOTOX** ; Allergan Inc., Irvine, CA) treatment of the lateral periocular region relaxes the vertical fibers of the orbicularis oculi and results in softening of the lateral orbital crow's feet rhytides and widening of the palpebral aperture. OBJECTIVE. To compare the effects of full-face BBL in combination with BTX-A and BBL alone in female subjects with Fitzpatrick I-III **skin** types, Glogau II-III rhytides, and significant associated facial lentigines and telangiectasia. METHODS. This was a prospective, randomized study of 30 women with moderate to severe crow's feet rhytides. Half of the subjects were treated with BTX-A and BBL and the other half with BBL alone. Their response was assessed clinically and photographically. **Skin** biopsies of the temporal **skin** were taken from two subjects in each group and were stained with Masson trichrome. RESULTS. Patients treated with a combination of BTX-A and BBL experienced a better response to treatment, both at rest and on maximum smile, as well as a slightly improved response in associated lentigines, telangiectasia, pore size, and facial **skin** texture compared with patients who received BBL treatment alone. **Skin** biopsies showed an increase in dermal collagen in each group. CONCLUSIONS. The patients in this study benefited from both treatments. Although BBL led to a remarkable improvement in full-face telangiectasias, lentigines, and **skin** texture, the improvement increased in all categories with combination therapy. In addition, an added improvement in the full-face aesthetic with both BTX-A and BBL therapy combined was obvious. These results suggest that both treatments-although evidently complementary-may also act synergistically to produce optimal clinical effects, revolutionizing the treatment of facial aging.

English Descriptors: Surgery; Face; Light; Treatment; Bilateral; Foot; Bontoxilysin; Dermatology
Broad Descriptors: Metalloendopeptidases; Peptidases; Hydrolases; Enzyme; Metalloendopeptidases; Peptidases; Hydrolases; Enzyme; Metalloendopeptidases; Peptidases; Hydrolases; Enzima

French Descriptors: Chirurgie; Face; Lumiere; Traitement; Bilateral; Pied; Bontoxilysin; Dermatologie

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TOPICAL DELIVERY OF COSMETIC AGENTS

PROCEDE D'ADMINISTRATION D'AGENTS COSMETIQUES PAR APPLICATION TOPIQUE

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Tags: Female
Descriptors: *Botulinum Toxin Type A; *Light; *Neuromuscular Agents; * **Skin** Aging--drug effects--DE; * **Skin** Aging--radiation effects--RE; Adult; Comparative Study; Face; Humans; Middle Aged; Prospective Studies; Time Factors
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Lasers and cosmetic dermatologic surgery for aging skin.
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Section of Dermatologic Surgery, Department of Dermatology, Boston University School of Medicine, Boston, Massachusetts 02118, USA.
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Many topical agents and physical modalities have been used throughout the years to give the face a more youthful appearance. The goal has always been to effectively and consistently rejuvenate the face while minimizing the time of recovery and risk for complications. Because each person is unique, there is no one modality that is best for everyone. This article reviews some of the options available for treating photoaged **skin** in 2001. Various lasers (e.g., vascular lesion, **pigmented** lesion, **hair** removal, and resurfacing), **botulinum** A toxin, chemical peels, and various dermal and subcutaneous filler substances all are discussed. (86 Refs.)

Descriptors: *Laser Surgery; * **Skin** --surgery--SU; * **Skin** Aging --pathology--PA; * **Skin** Diseases--surgery--SU; Biocompatible Materials; Botulinum Toxin Type A--therapeutic use--TU; Chemexfoliation; Face; **Hair** Removal--methods--MT; Humans; Rhytidoplasty--methods--MT; **Skin** Diseases --therapy--TH

CAS Registry No.: 0 (Biocompatible Materials); 0 (Botulinum Toxin Type A)

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Prevalence of periocular depigmentation after repeated botulinum toxin A injections in African American patients.

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Botulinum toxin A (**Botox**), administered by subcutaneous or intramuscular injection, is the most commonly used and most successful medication for many craniocervical dystonias. Although some patients experience side effects related to the neuroparalytic action of the medication, these side effects are temporary. In 1996, permanent periocular cutaneous depigmentation was reported in three white patients after repeated **Botox** injections, suggesting that loss or alteration of **melanin** **pigment** might be a permanent side effect of long-term **Botox** injections. The authors examined and photographed 26 African American patients who were receiving periocular **Botox** injections for hemifacial spasm and essential blepharospasm. The authors found no evidence of periocular cutaneous depigmentation in any of these patients.

Descriptors: ***Botulinum** Toxin Type A--adverse effects--AE; *Hypopigmentation--chemically induced--CI; *Neuromuscular Agents--adverse effects--AE; * **Skin** --drug effects--DE; * **Skin** **Pigmentation** --drug effects--DE; Adult; African Continental Ancestry Group; Aged; Aged, 80 and over; Blepharospasm--drug therapy--DT; Botulinum Toxin Type A--therapeutic use--TU; Hemifacial Spasm--drug therapy--DT; Humans; Hypopigmentation